ABSTRACT

Title: Improving Safety Culture and Outcomes in VA Hospitals

Site Principal Investigator: Amy K. Rosen, Ph.D.

OBJECTIVES: The study is to assess the level of safety climate in VA hospitals. The study has the following objectives:

- 1. To further determine the psychometric characteristics of the PSCHO instrument based on existing data from prior administrations and on data to be acquired in this study.
- 2. To assess the strength and uniformity of the safety climate in a nationwide sample of 30 VA hospitals and in a representative sub-sample of work units of high intrinsic hazard.
- 3. To assess the relation between level of safety climate with general organizational culture typology (measured by the Zammuto and Karkower survey) and implementation of quality improvement (QI) practices (measured using Baldrige scales).
- 4. To assess the relationship between hospital characteristics (e.g. size, location, nurse staffing, level of sub-specialty care, academic tier of affiliated medical school) with the level of safety climate across VA hospitals.
- 5. To determine the relationship between level and uniformity of safety climate in hospital and patient-safety outcomes: the Patient Safety Indicators (PSIs) developed by AHRQ/UC-Stanford and the National Surgical Quality Improvement Program (NSQIP) outcome measures
- To compare the level and uniformity of safety climate as measured in this study in VA hospitals, against that measured in other studies of non-VA hospitals, high-reliability organizations.

RESEARCH PLAN: The project will obtain FY 2005 primary data on the safety climate in VA by surveying employees with the Patient Safety Climate in Healthcare Organizations (PSCHO) survey plus either the modified Baldrige quality management implementation survey or the abridged Zammuto and Krakower survey. Survey will be administered twice, in year one and year three of the study. Primary and secondary data (FY2005-2006) from a variety of VA and non-VA sources will investigate relationships between safety climate and QI practices, PSIs, NSQIP outcome data, and hospital characteristics.

METHODS: We will compare safety climate in VA and non-VA hospitals using comparable data being collected by the investigators on 120 non-VA hospitals. We will also compare VA safety climate with the safety climate in non-health care organizations. The PSCHO survey will be administered twice, in year one and year three of the study, to examine longitudinal changes in safety climate and to determine if relationships between climate and outcome are stable over time. We will use bivariate comparisons followed by regression analyses to study relationships between safety climate and patient-safety outcomes (e.g., the PSIs and NSQIP outcomes).

CLINICAL RELEVANCE: The VA is a leader in the patient safety movement and has instituted a number of programs aimed at reducing preventable deaths or morbidity. Yet, little has been done to address the systematic safety climate of the VA's management or front-line workers. This study will help VA leadership determine whether changes in the safety climate in VA are needed, and if so, what the appropriate targets for those interventions should be.